



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 5822

<b>SERIAL NUMBER</b> 10/576,992	<b>FILING or 371(c) DATE</b> 04/25/2006 <b>RULE</b>	<b>CLASS</b> 359	<b>GROUP ART UNIT</b> 1797	<b>ATTORNEY DOCKET NO.</b> MSE-2682	
<b>APPLICANTS</b> Allen J. Brenneman, Goshen, IN; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/36086 10/29/2004 which claims benefit of 60/515,337 10/30/2003 <i>ctmm</i> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> <i>ctmm</i> 11/02/2006					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWINGS</b> 5	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> BAYER HEALTHCARE, LLC 555 WHITE PLAINS ROAD TARRYTOWN, NY 10591 UNITED STATES					
<b>TITLE</b> Formats for optical analysis and methods of manufacturing the same					
<b>FILING FEE RECEIVED</b> 1200	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees		
			<input type="checkbox"/> 1.16 Fees (Filing)		
			<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		
			<input type="checkbox"/> 1.18 Fees (Issue)		
			<input type="checkbox"/> Other _____		
			<input type="checkbox"/> Credit		